## City of Shakopee 129 Holmes St. S. Shakopee, MN 55379

129 Holmes St. S. Shakopee, MN 55379 Inspection: 952.233.9396 Building: 952.233.9397 Fax: 952.233.3801



## **Special Structural Testing and Inspection Program Summary Schedule**

Project Name				Project No	
Location				Permit No.	(1)
Technical (2)			Type of	Specific Report	Assigned
Section	Article	Description (3)	Inspector (4)	Frequency (5)	Firm (6)
(If not otherwise specified, assumed program will be "Guidelines for Special Inspection & Testing" as contained in the State Building Code and as modified by the state adopted IBC.)  *A complete specification-ready program can be downloaded directly by visiting CASE/MN at www.cecm.org*  (1) Permit No. to be provided by the Building Official (2) Referenced to the specific technical scope section in the program. (3) Use descriptions per IBC Chapter 17, as adopted by Minnesota State Building Code. (4) Special Inspector – Technical (SIT); Special Inspector – Structural (SIS) (5) Weekly, monthly, per test/inspection, per floor, etc. (6) Name of Firm contracted to perform services.  ACKNOWLEDGEMENTS (Each appropriate representative shall sign below)					
Owner:		F	Firm:		Date:
			irm:		Date:
Architect: _		F	irm:		Date:
SER:		F	Firm:		Date:
SI-S:		F	Firm:		Date:
TA:		F	irm:		Date:
F:		F	irm:		Date:
		chitect of record or building observe shall be identified a		nes of all prospective s	pecial inspectors
Legend:		al Engineer of Record Inspector - Structural	SI-T = Special Inspector F = Fabricator	- Technical TA	= Testing Agency
Accepted for the Building Department By Date					